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APPLICANTS

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** CONTINUING DATA *****

note K2

** FOREIGN APPLICATIONS *****

note K2

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 14	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 10
Verified and Acknowledged	Examiner's Signature <i>K</i> Initials <i>7/1</i>				

ADDRESS

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TITLE

Printer color registration correction

FILING FEE RECEIVED 1588	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____